PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number 0 1 00 1 2

. CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TC	OTAL CLAIMS	21	(00,0,	1	(OOIG	Iffifi 2)	ſ	RATE	FEE	OR 1			
FOR			NUMBER	FILED	NUME	BER EXTRA	ł	BASIC FEE		1_	RATE BASIC FEE	710.00	
_	OTAL CHARGE	ARI E CLAIMS	0.1			1	ł		355.00	-OH		<u> </u>	
				minus 20= *				X\$ 9=		OR	X\$18=	18	
-	DEPENDENT CI		J					X40=		OR	X80=		
		NDENT CLAIM PI						+135=		OR	+270=	l.	
* 11	the difference	in column 1 is	less than ze	than zero, enter "0" in column 2				TOTAL		OR	TOTAL	728	
CLAIMS AS AMENDED - PART II										•	OTHER		
_		(Column 1) CLAIMS		(Column 2)		(Column 3)	F	SMALL		OR	SMALL		
IENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AM	Independent	*	Minus *** N OF MULTIPLE DEPENDEN		CI AINA	=		X40=		OR	X80=		
<u> </u>	FINOT FRESE	INTATION OF IVIC	JLIIPLE DEI	PENDENT	CLAIM			+135=		OR	+270=		
							^	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 3)	-	וטטוו. רבב ן		a ,	ADDII. FEE						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Q	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=	Ī	X40=		OR	X80=		
	FINST PHESE	NTATION OF MU	JUIPLE DEP	ENDENT	CLAIM		T	+135=		OR	+270=		
			L	TOTAL			TOTAL						
		(Column 3)	Ai	DDIT. FEE L		10	ADDIT. FEE						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NO.	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=	十	X40=		ŀ	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\vdash	740-		OR			
• 19	f the entry in colu	mn 1 ie laee than th	antaria colu	0 write	"O" :- aol			+135=		OR	+270=		
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." 										OR A	TOTAL ADDIT. FEE		
,	The "Highest Nurr	nber Previously Paid	d For" (Total or	Independe	nt) is the	n 3, enter "3." highest number			ropriate box				